

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 600358 RECEIPT DATE: 07 / 14 / 00
IA NUMBER: PCT/CA99 / 00038 IA FILING DATE: 01 / 18 / 99
FAMILY NAME: ROIFMAN DELAY WAIVED (Y/N): Y
GIVEN NAME: CHAIM M DEMAND RECEIVED (Y/N): Y
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 01 / 16 / 98
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N
ATTORNEY DOCKET NUMBER: 3477-88 COUNTRY:
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000
NAME: KAREN A MAGGI FAX
STREET: PO BOX 37428
CITY: RALEIGH
STATE/COUNTRY: NC ZIP: 27627
EMAIL:
APPLICATION TITLES:
HUMAN LYMPHOID PROTEIN IN TYROSINE PHOSPHATASES

TAB TO LAST POSITION, PUSH SEND